

The protease fibroblast activation protein [FAP] as a biomarker and therapeutic target in chronic liver injury

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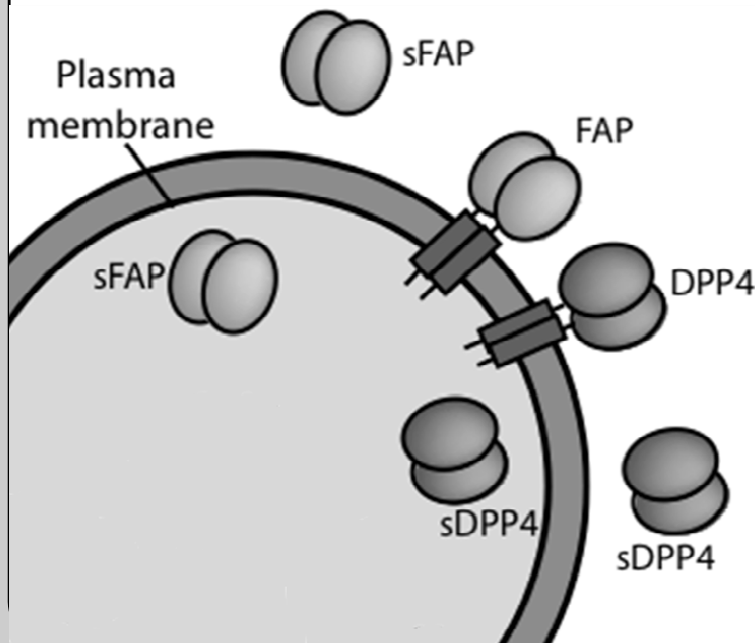
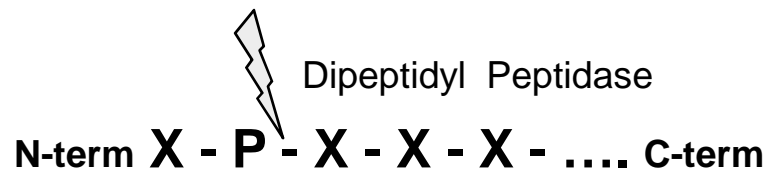
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Fibroblast Activation Protein (FAP) - similarity to Dipeptidyl Peptidase 4 (DPP4)

Protease Activity:



DPP4 roles:

Type 2 Diabetes
Tumor growth

Liver fibrosis & fatty liver

FAP roles:

Fibrinolysis
Tumor growth
Atherosclerosis

Liver fibrosis & fatty liver

Gorrell 2005 *Clinical Science* **108**: 277

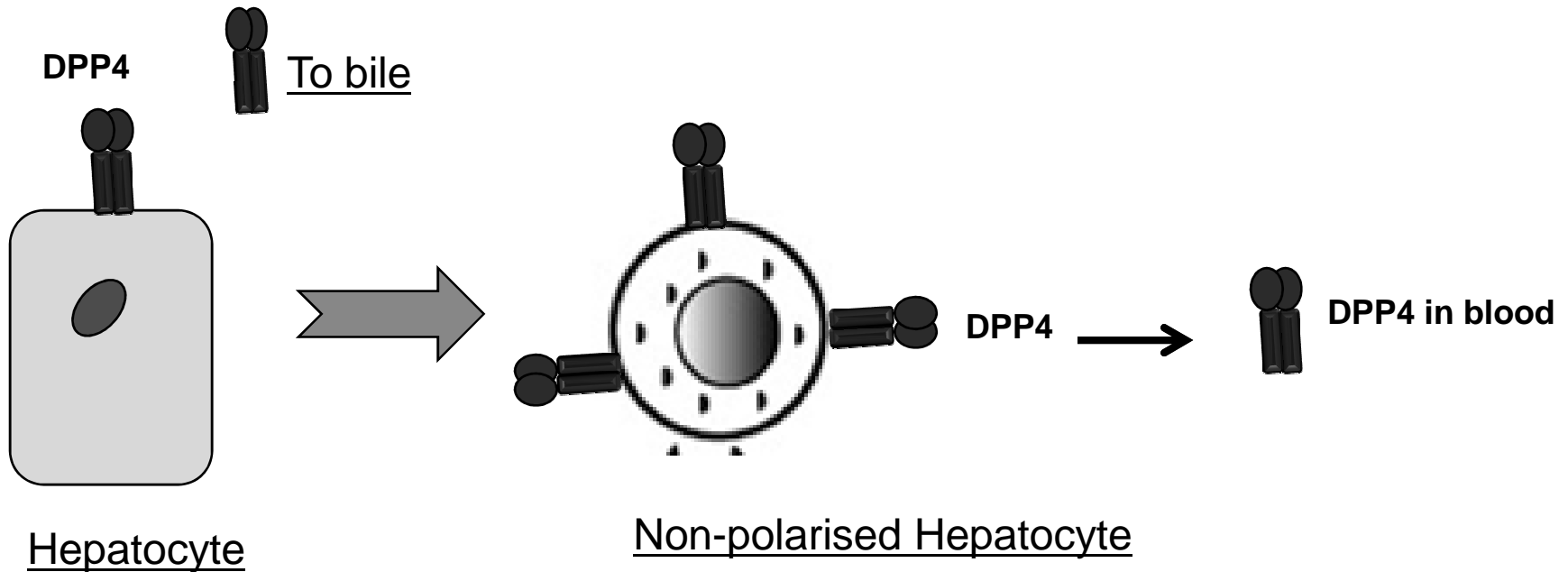
Hamson, Gorrell 2014 *Proteomics Clin Appl* **8**(6): 454



DPP4 in Chronic liver injury

Healthy liver

Injured liver



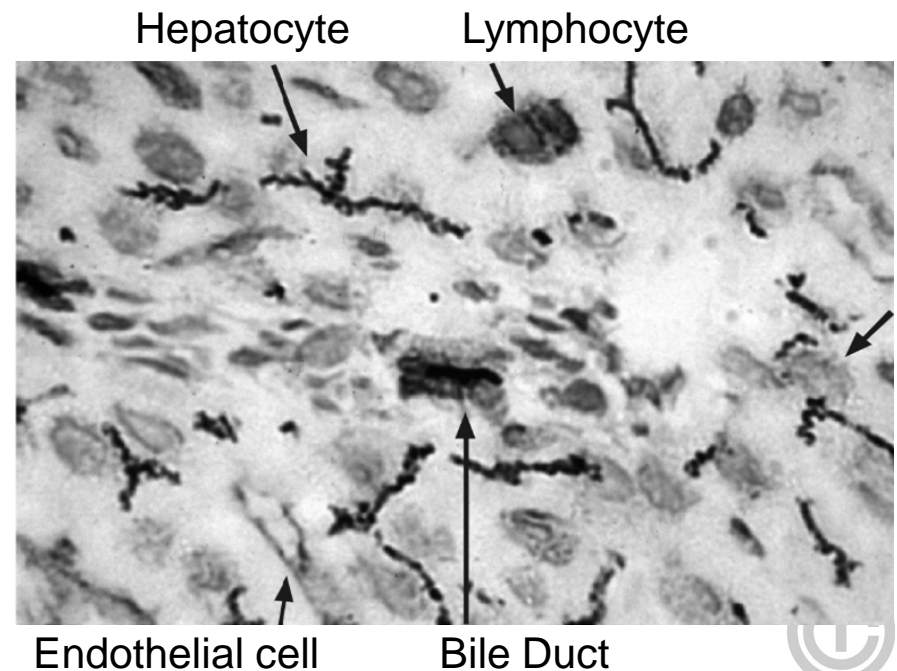
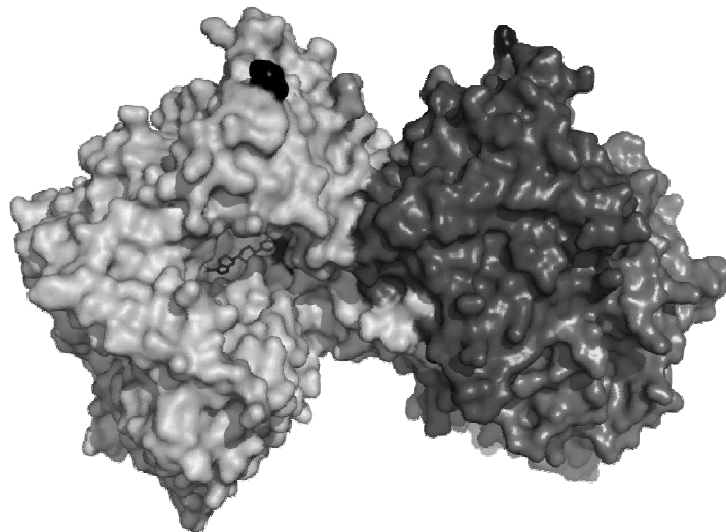
DPP4 increases in epithelial cells and lymphocytes



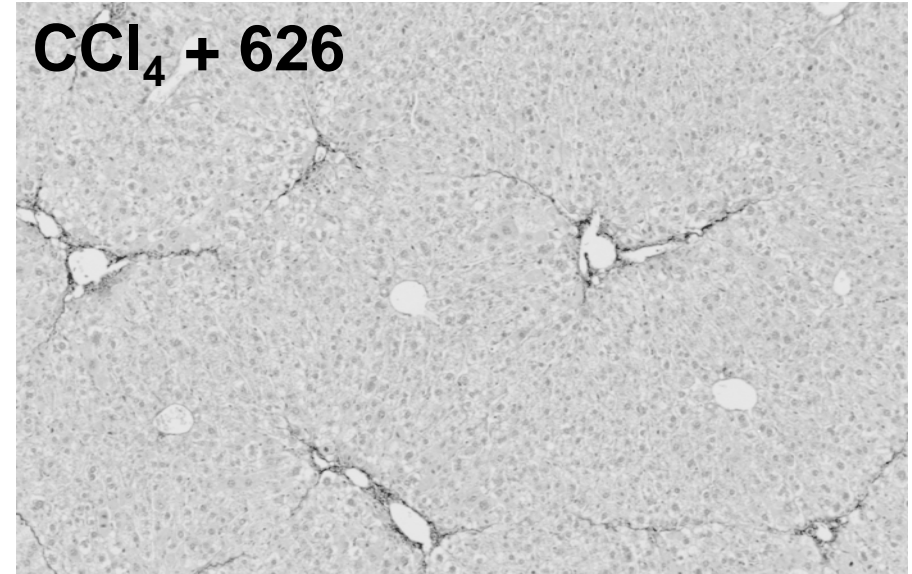
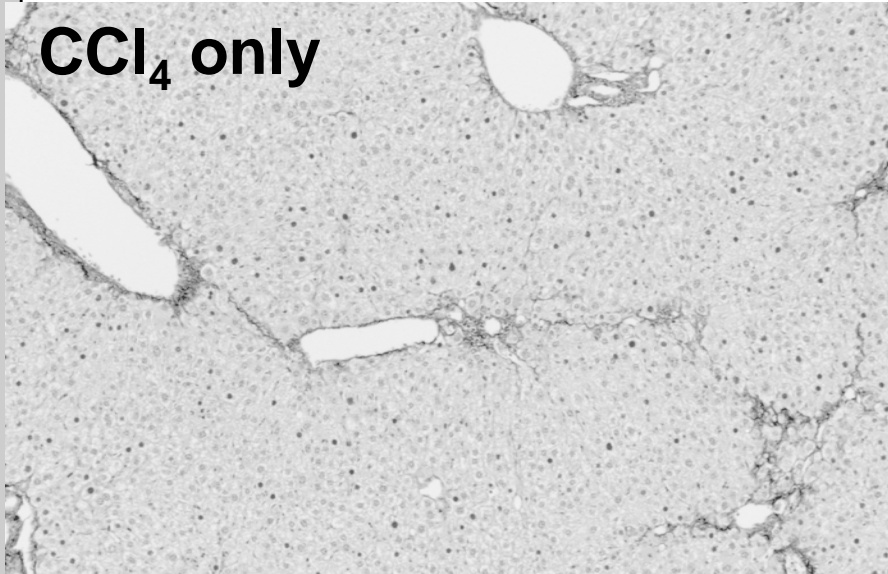
DPP4 in Chronic Liver Injury

- DPP4 is ubiquitous. But liver is a large organ...
- DPP4 expression increases in fibrosis and cirrhosis: Both in liver and blood.
[Williams K, Gorrell, Zekry, Twigg et al 2014 *J. Diabetes* in press; doi 10.1111/1753-0407.12237]
- Preclinically, DPP4 inhibition lessens steatosis.

Review: Ito 2013 *World J Gastro* **19**: 2298

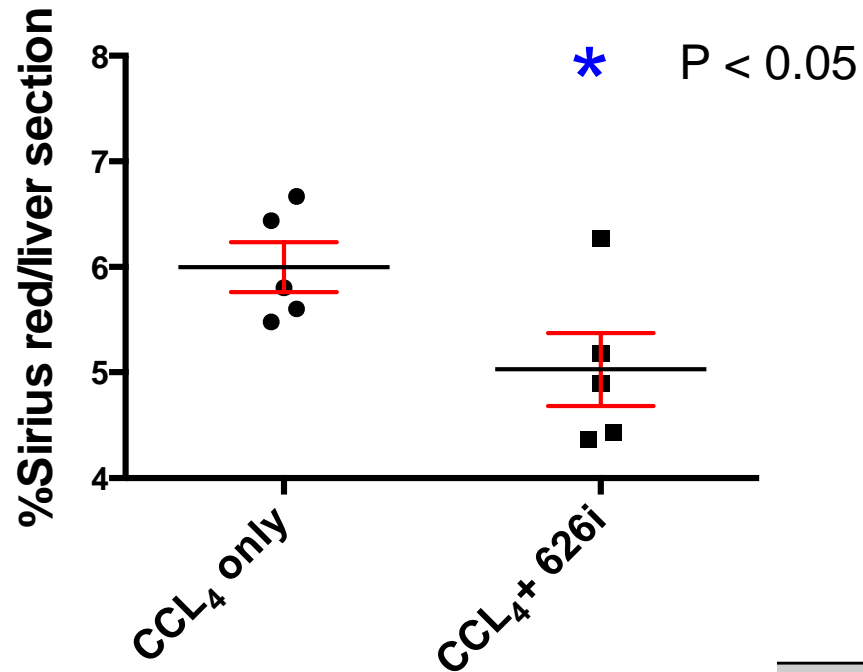


DPP4 inhibition can lessen liver fibrosis

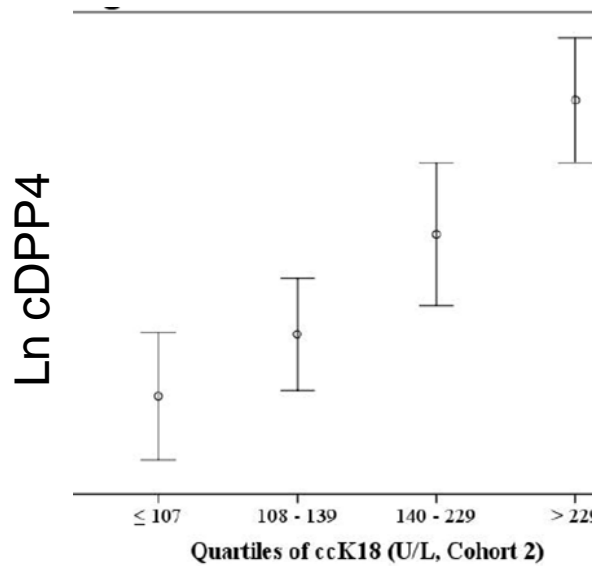


4 weeks of CCl₄
With DPP4 inhibition
[MK626 ; MSD]

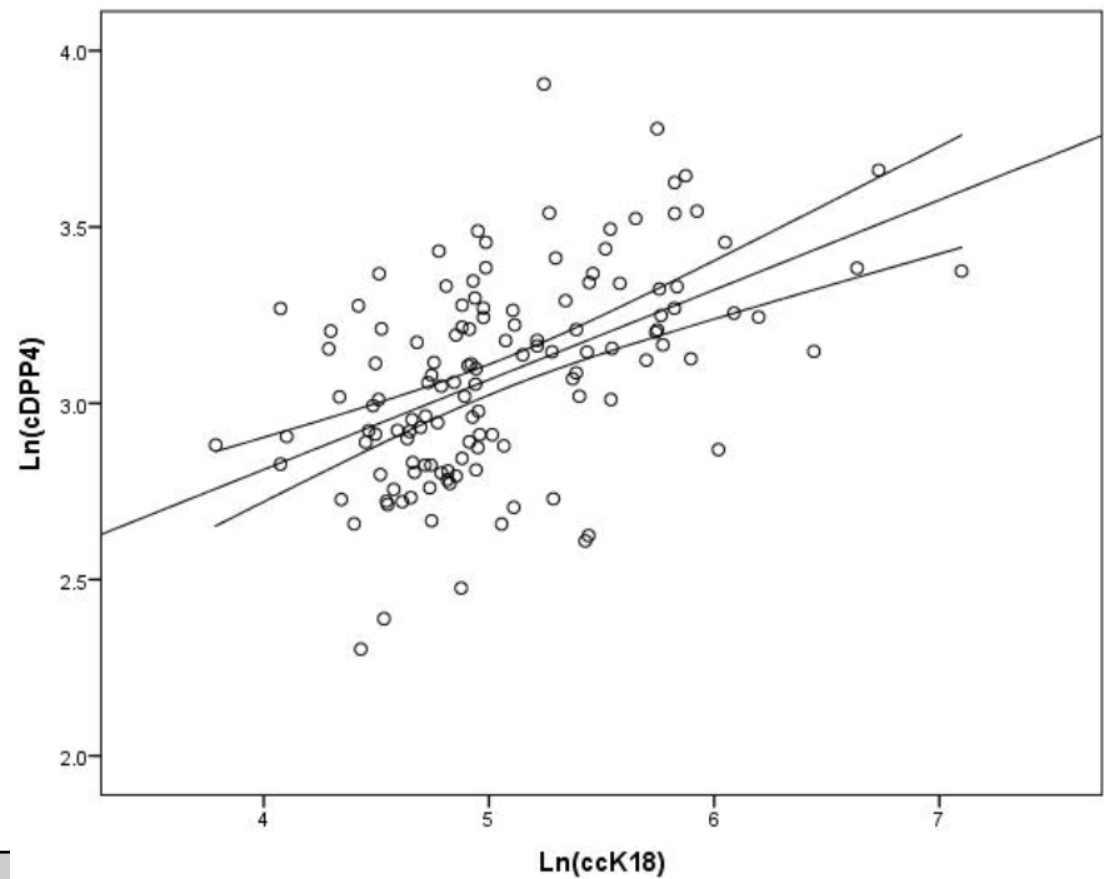
Sirius red staining in liver



DPP4 as a biomarker



Williams K, Gorrell, Zekry, Twigg et al 2014
J. Diabetes in press; doi 10.1111/1753-0407.12237



Fibroblast activation protein: [FAP]: Unique Expression

- LOW expression in normal resting adult tissue

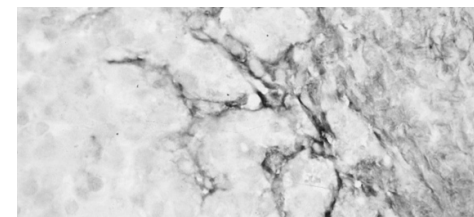
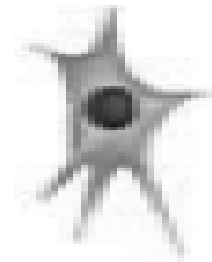
- Tissue Remodelling

- Embryogenesis
- Wound healing



- Activated Fibroblasts

- Epithelial tumours
 - Arthritis
 - Atherosclerosis
 - Liver and lung fibrosis
- Activated myofibroblasts
 - Activated Stellate cells

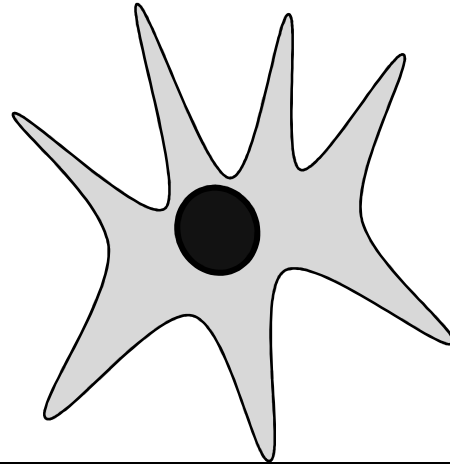


FAP in human liver



FAP in Chronic liver injury

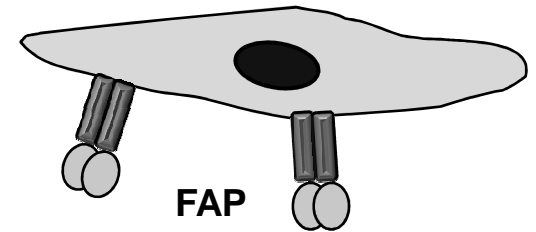
Quiescent Hepatic Stellate cell (HSC)



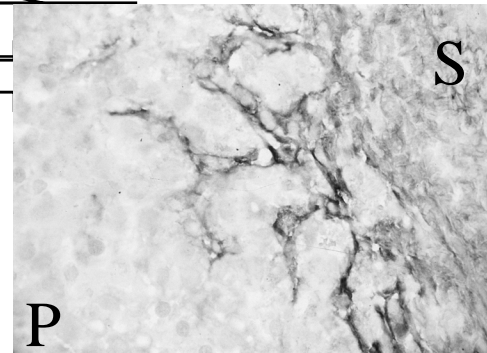
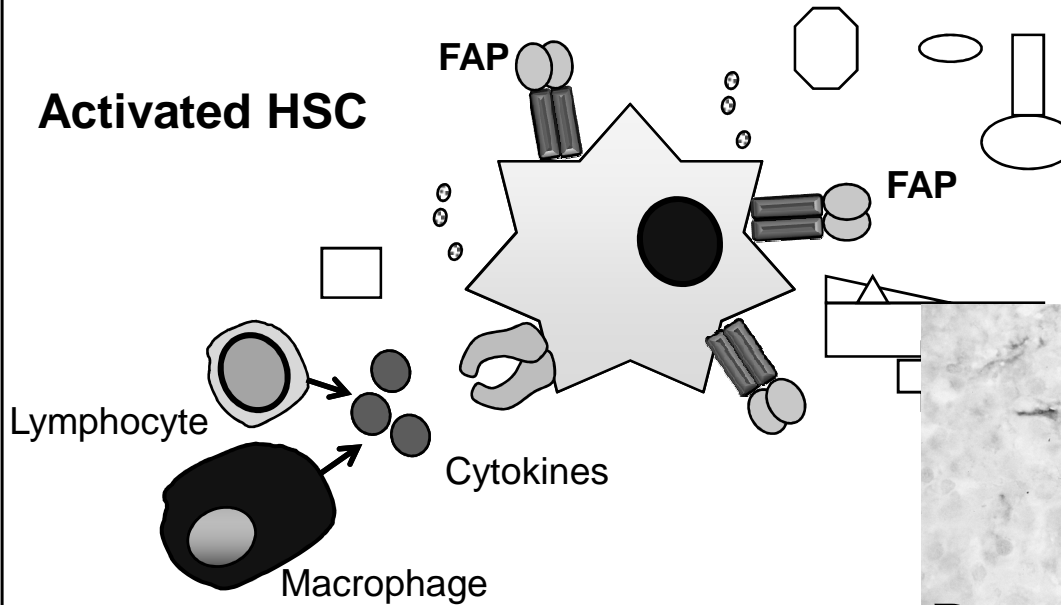
FAP very low

FAP high on HSC and myofibroblast

myofibroblast



Activated HSC

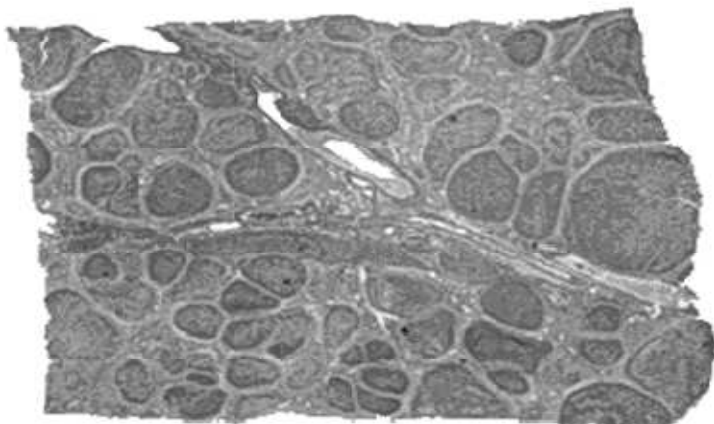


FAP correlates with fibrosis severity (Levy, 2002)

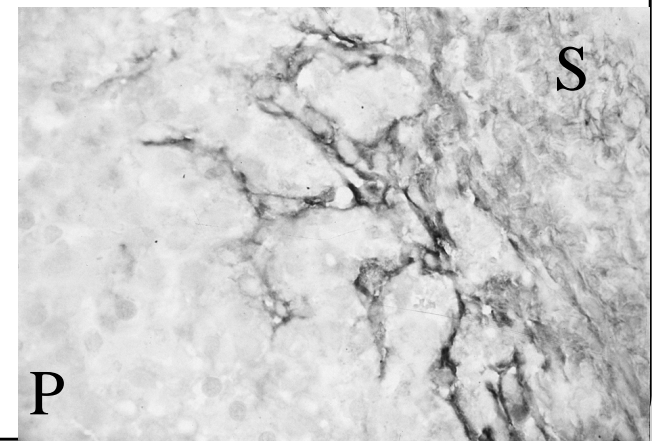


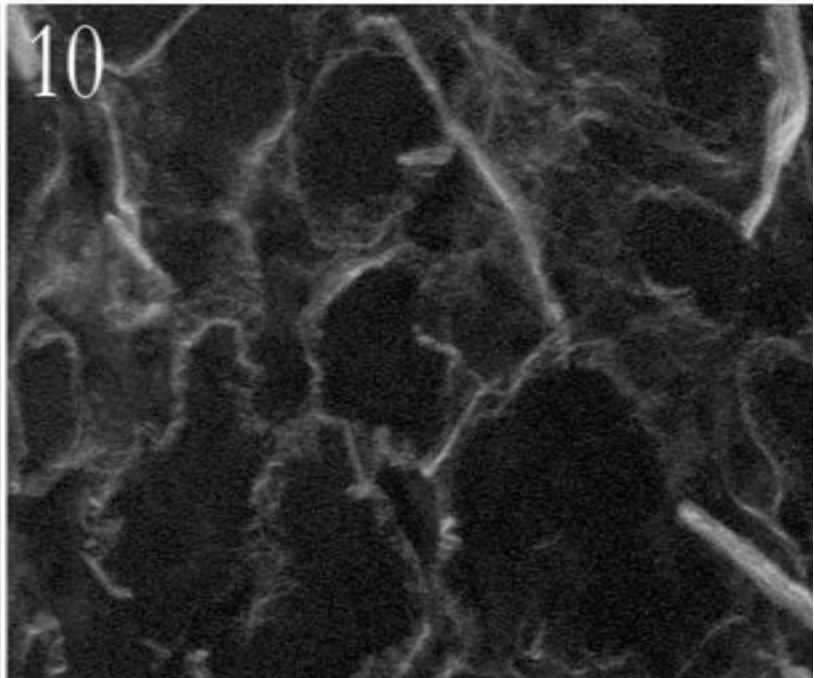
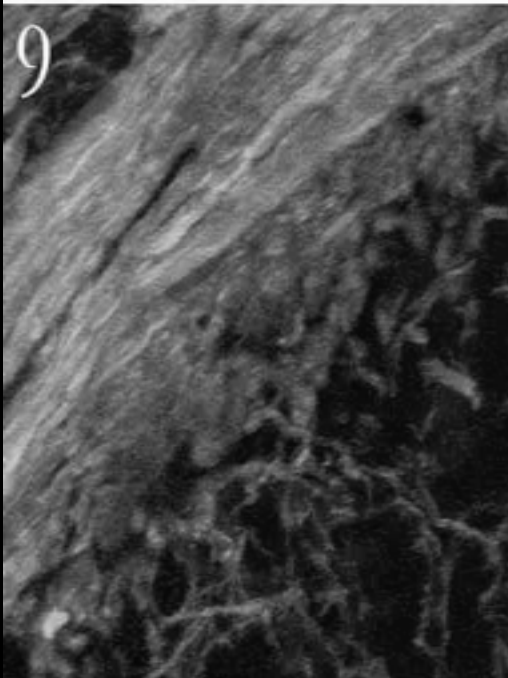
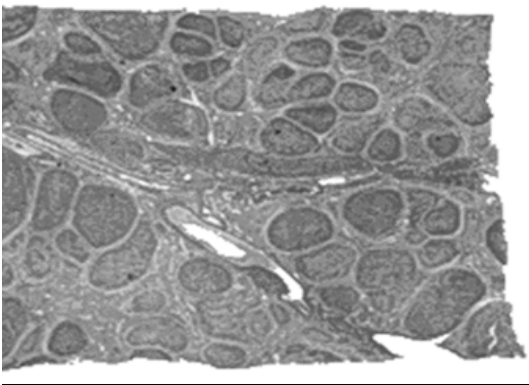
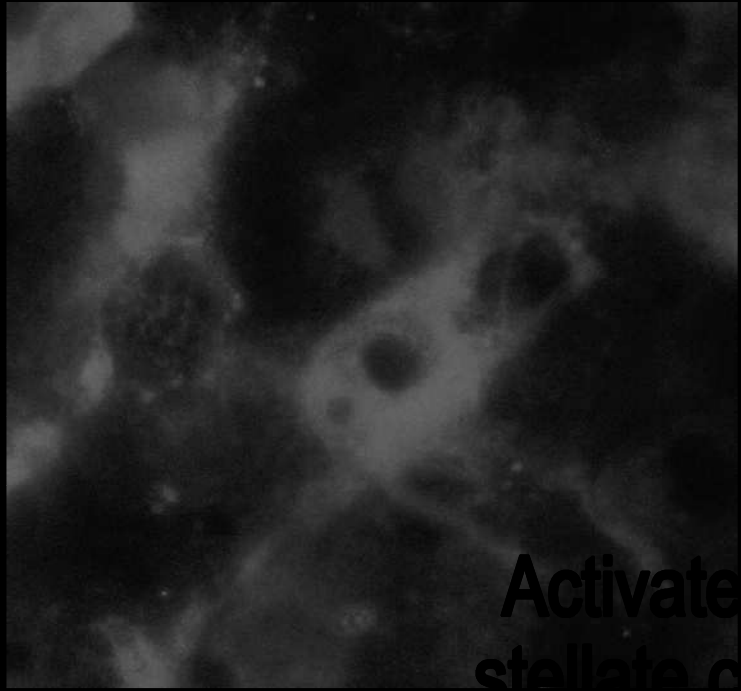
FAP in human liver is pro-fibrotic

- Expressed by **activated** hepatic stellate cells [HSC] and myofibroblasts in chronic liver injury (Levy Gorrell *et al* 1999 *Hepatology*)
- Intensity of FAP expression correlates with **fibrosis** severity (Levy, Gorrell 2002 *Liver Internat*)
- FAP expression is stimulated by TGF β and retinoic acid.
- **Gelatinase** (collagen-I) and **DPP** activities in liver (Park 1999; Levy, Gorrell 1999 *Hepatology*)
- Collagen cleavage by FAP is enhanced by MMP1 cleavage.
- Fibrinolysis inhibition by cutting human α 2-antiplasmin (Lee 2012 *J Thromb Haemost*)
- See: Gorrell & Park 2013 Fibroblast activation protein alpha. In *Handbook of Proteolytic Enzymes 3rd Edition*.
- See: Hamson, ... Gorrell 2014 *Proteomics Clin Appl* **8**(6): 454.



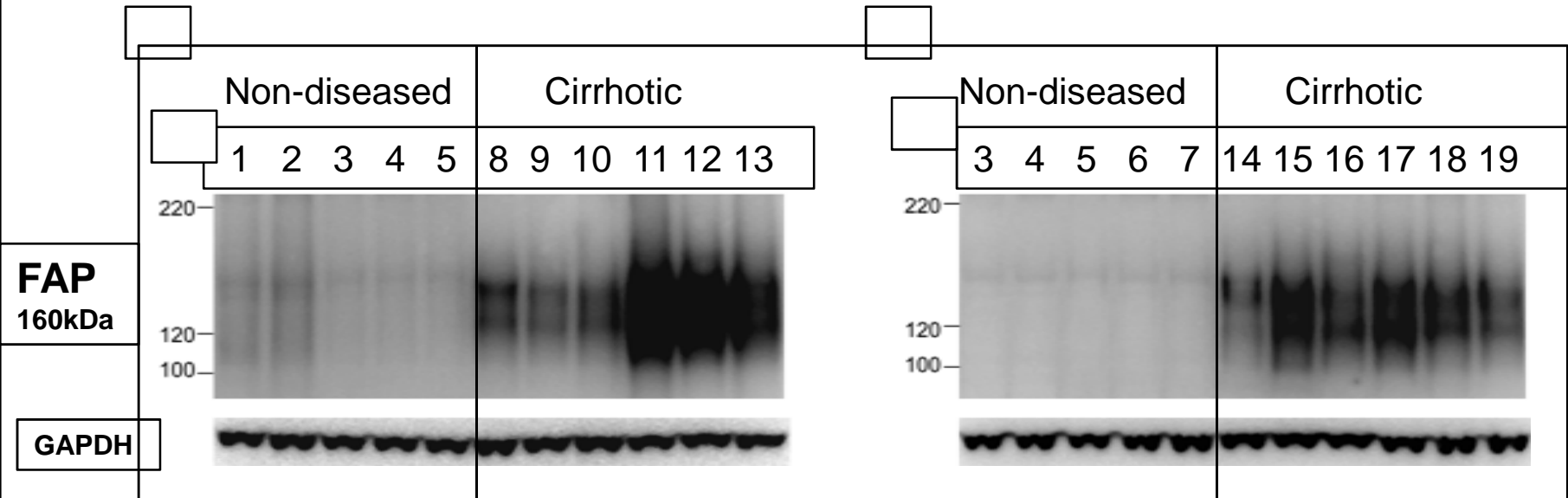
FAP in human
cirrhotic liver
(Wang, Gorrell 2005
Hepatology)



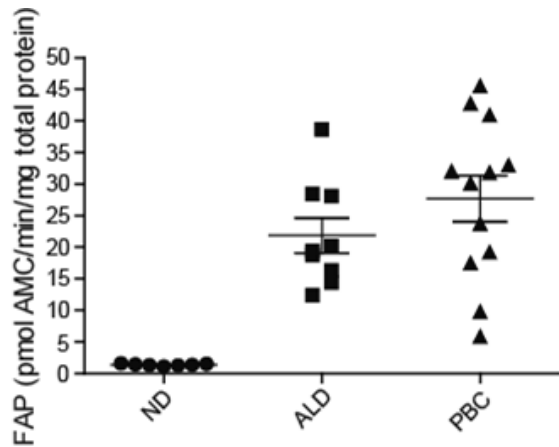


FAP is elevated in human cirrhosis

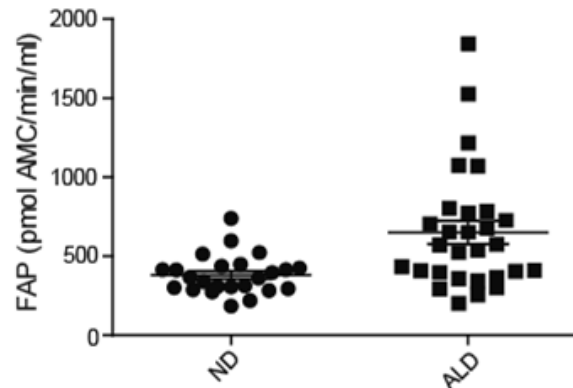
Immunoblot on human liver: Anti-human FAP



FAP enzyme activity in livers



FAP enzyme activity in sera

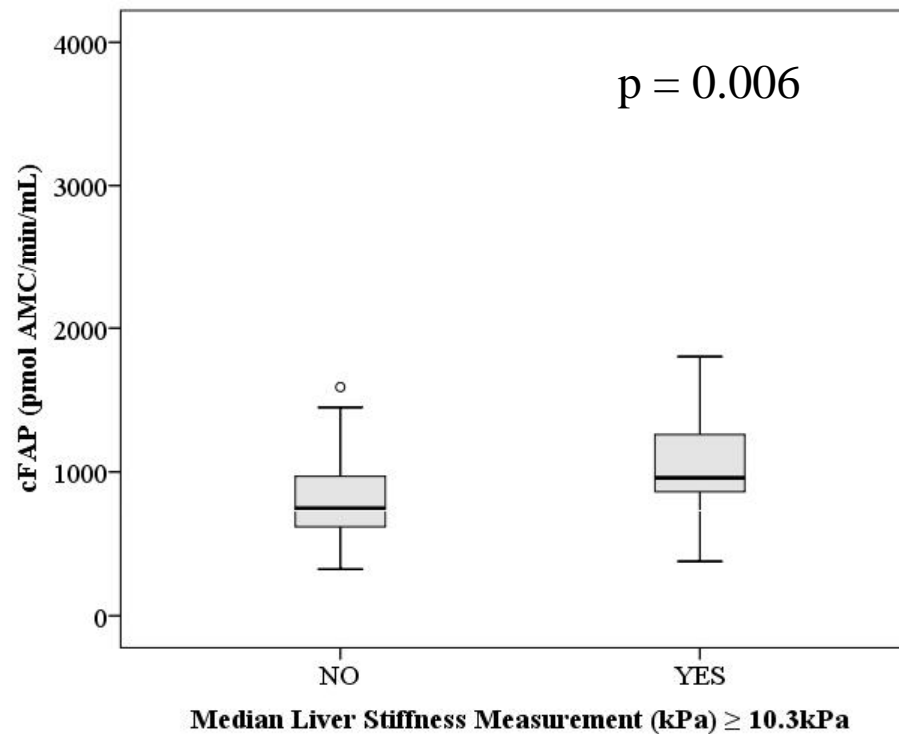


Keane, Yao, *et al*,
Bachovchin, Twigg,
Gorrell *FEBS OpenBio*
2014

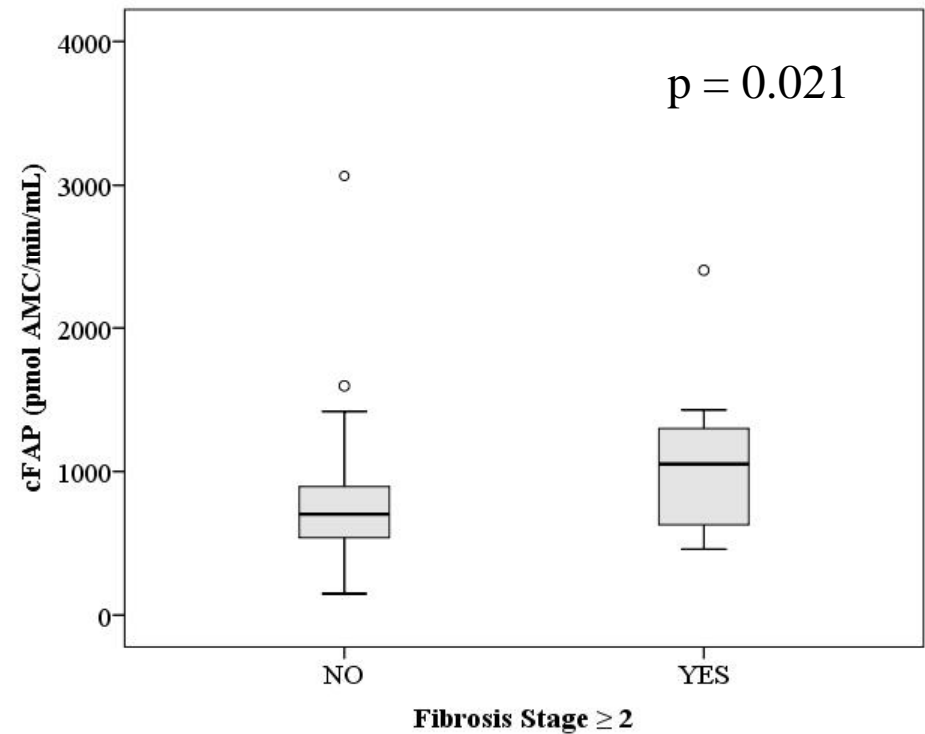


Relationship between clinically significant liver fibrosis and cFAP

Cohort 1, diabetes



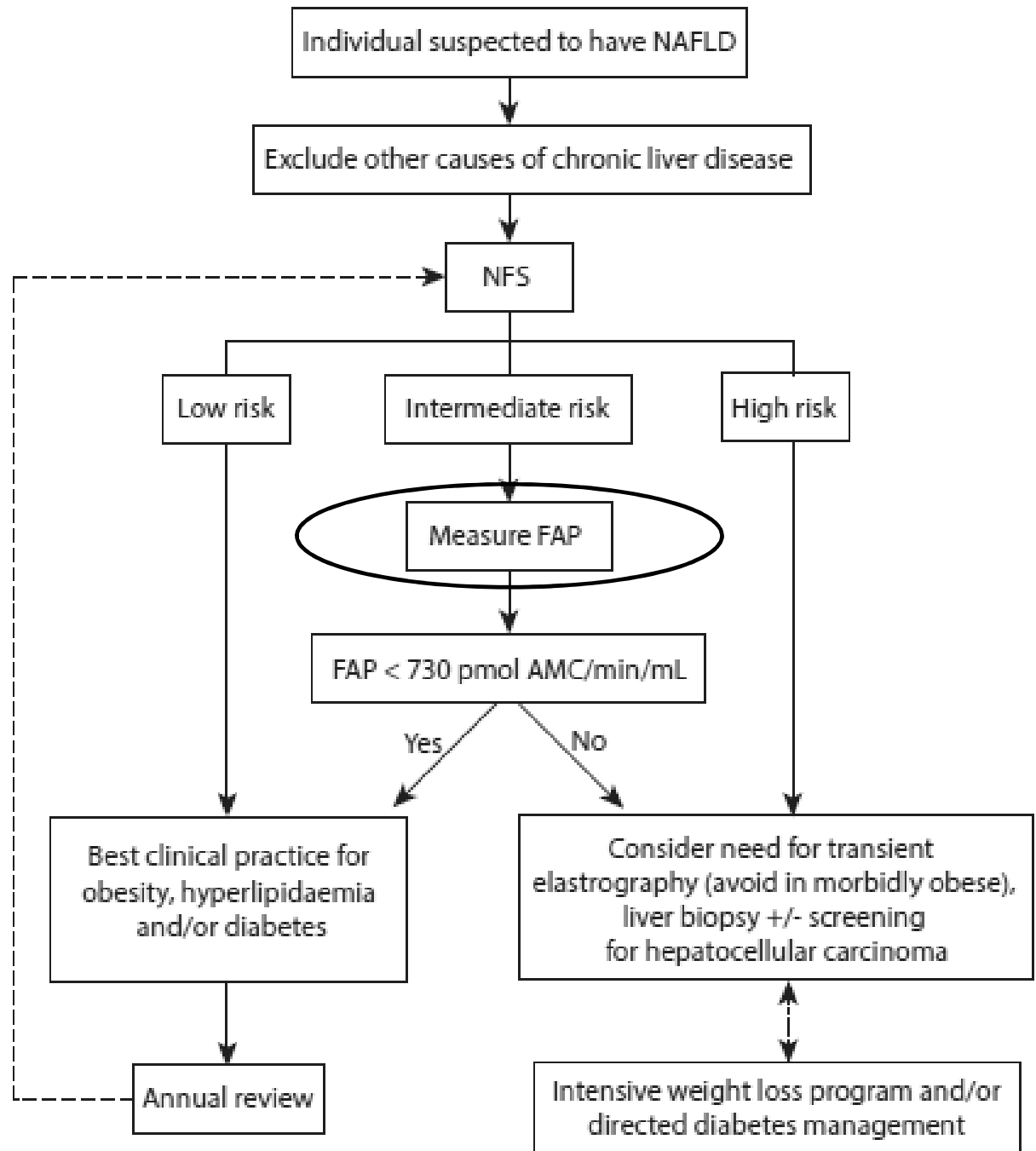
Cohort 2, obesity



Suggested clinical use of cFAP:

40% of Pts:
Intermediate NFS
low cFAP
No fibrosis

K. Williams
S. Twigg



Substrates in liver: potential biomarkers?

FAP:

- Alpha-2-antiplasmin
- Collagen I

DPP4 and FAP:

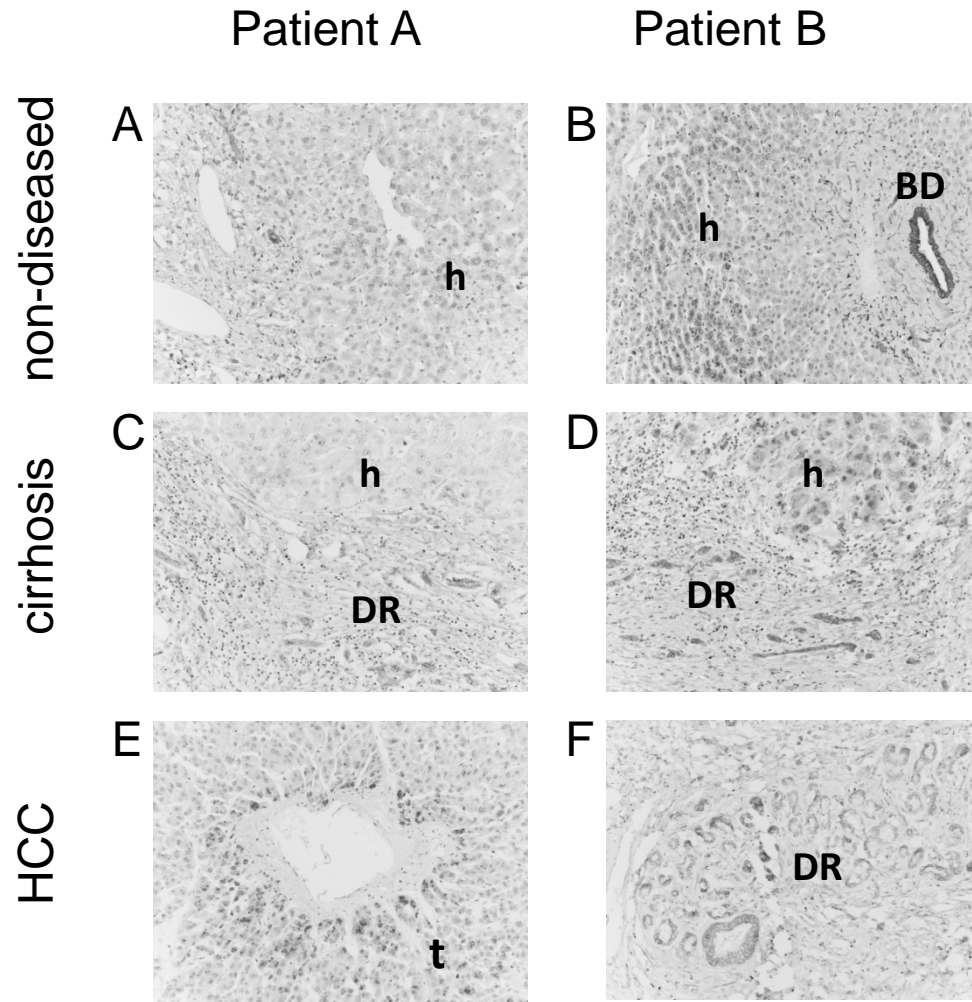
- Neuropeptide Y

DPP4:

- CXCL9
- CXCL10
- CXCL12



NPY [neuropeptide Y] expression in human liver

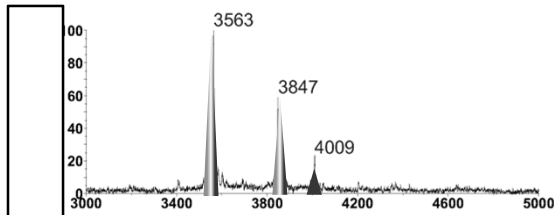


Neuropeptide Y

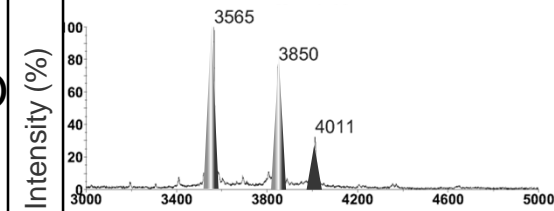
Mouse

Human

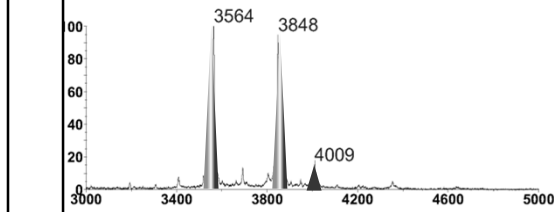
WT



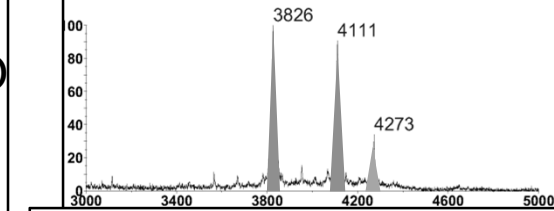
FAP GKO



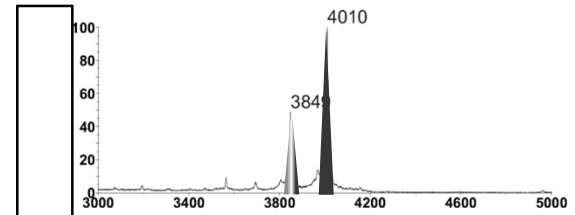
WT
+ DPP4i



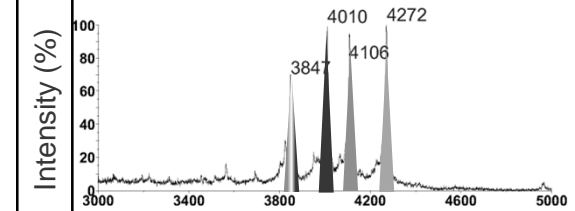
FAP GKO
+ DPP4i



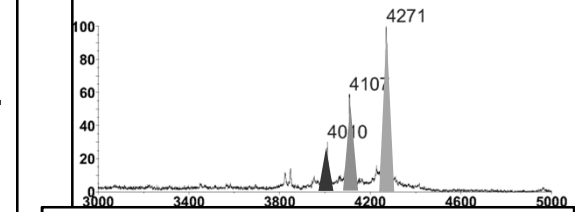
Untreat



DPP4i



non-sel.
DPPi



- Full length
- N cut
- C cut

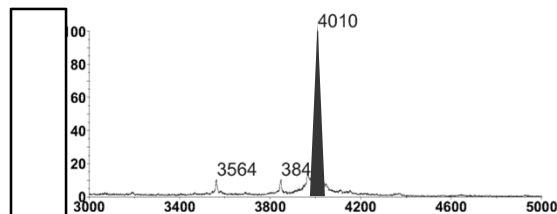


Neuropeptide Y with carboxypeptidase inhibition

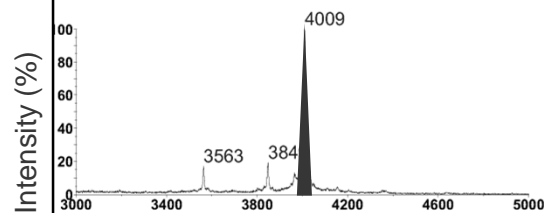
Mouse

Human

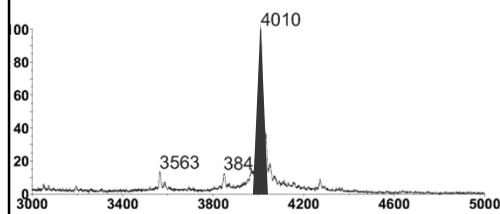
WT



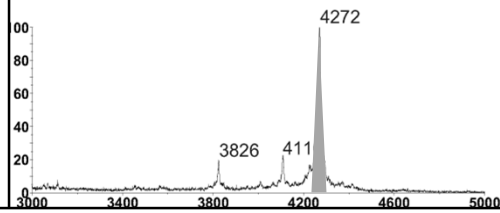
FAP GKO



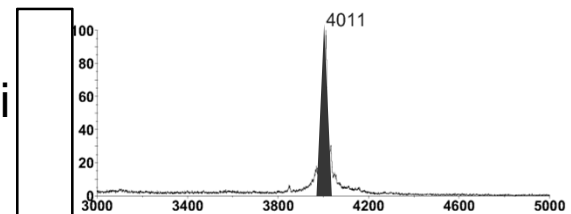
WT
+ DPP4i



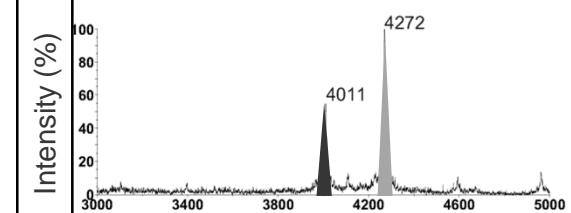
FAP GKO
+ DPP4i



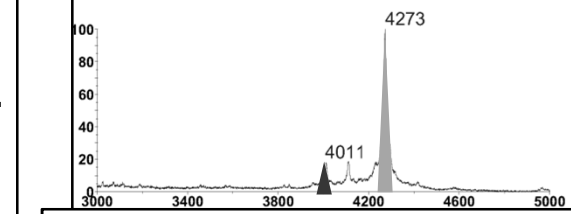
no DPPi



DPP4i



non-sel.
DPPi



- Full length
- N cut
- C cut



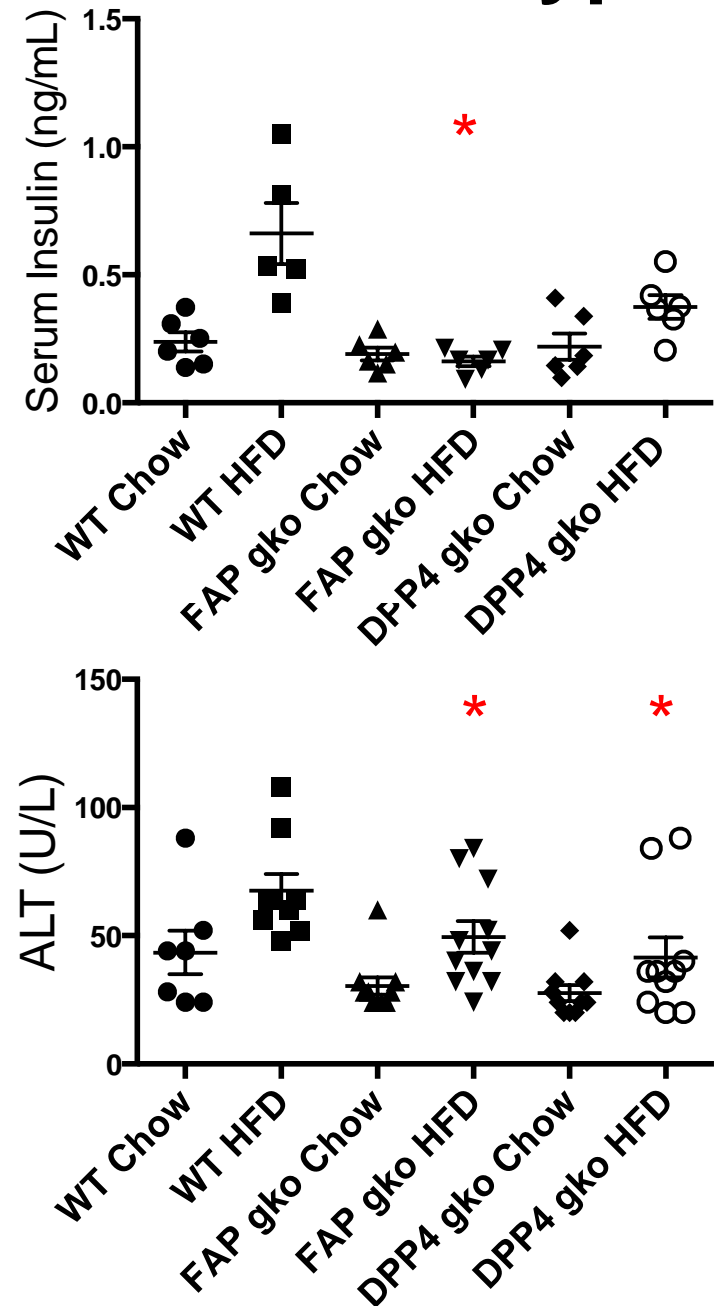
FAP gene knockout [gko] Mouse Phenotype:

Humans lacking active FAP have no adverse effects [Osborne, ...Gorrell 2014 *BBA Proteins*]

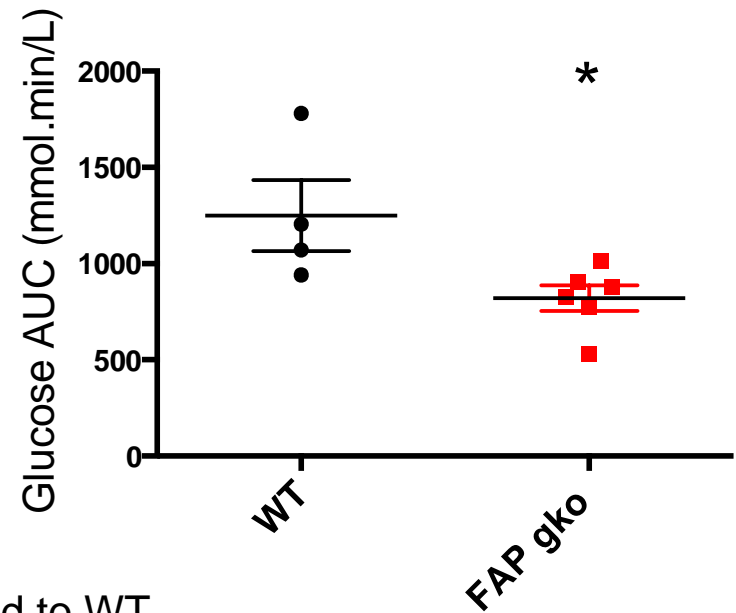
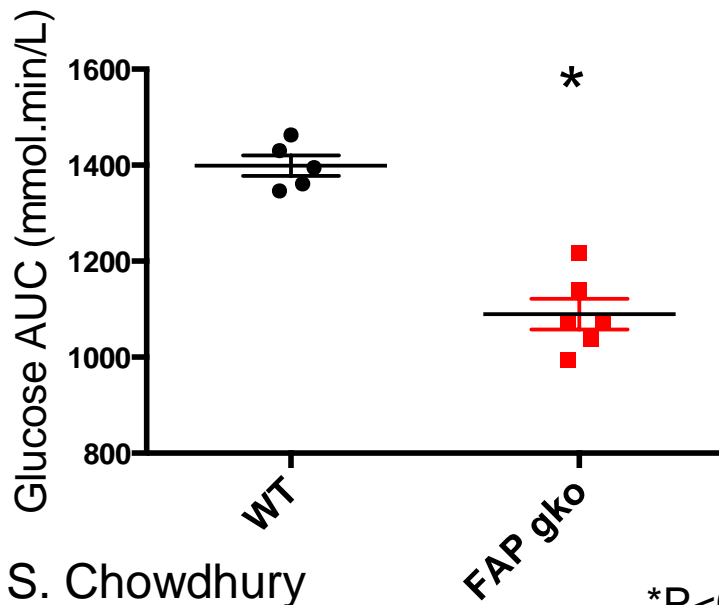
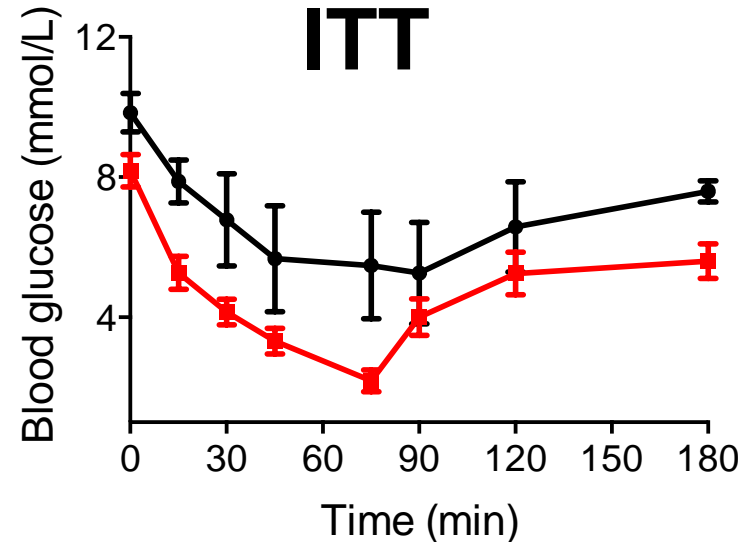
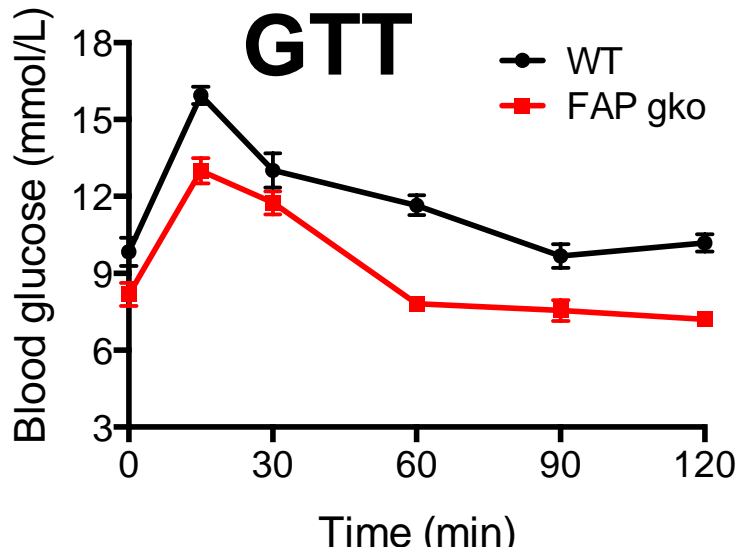
FAP gko mouse:

- Healthy and viable
- In liver fibrosis models:
 - Less fibrosis
 - Less inflammation
- In high fat diet (HFD) induced obesity (DIO) model:
 - Less liver lipid
 - Greater glucose tolerance
 - Less insulin resistance [HOMA-IR]
 - Less liver injury[ALT]

*p<0.05 compared to WT HFD



FAP gko mouse: improved glucose tolerance and insulin tolerance at 20 weeks DIO

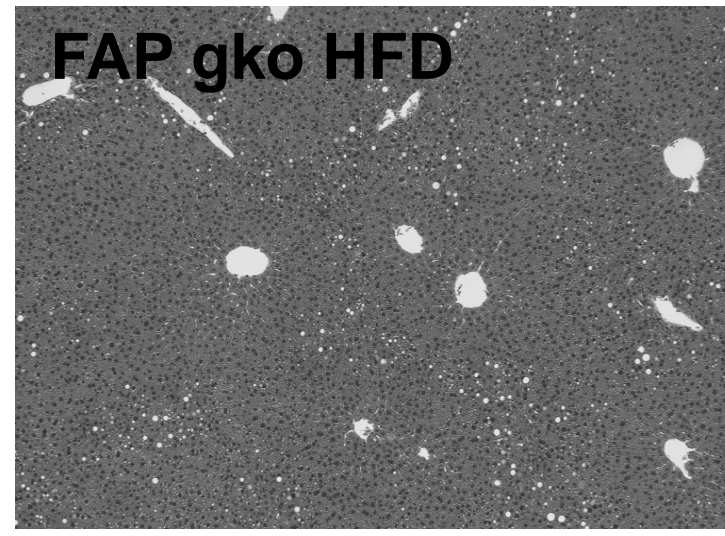
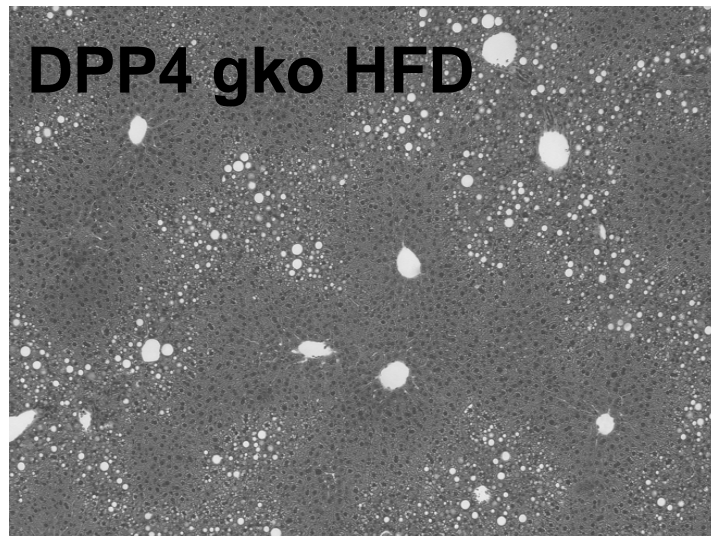
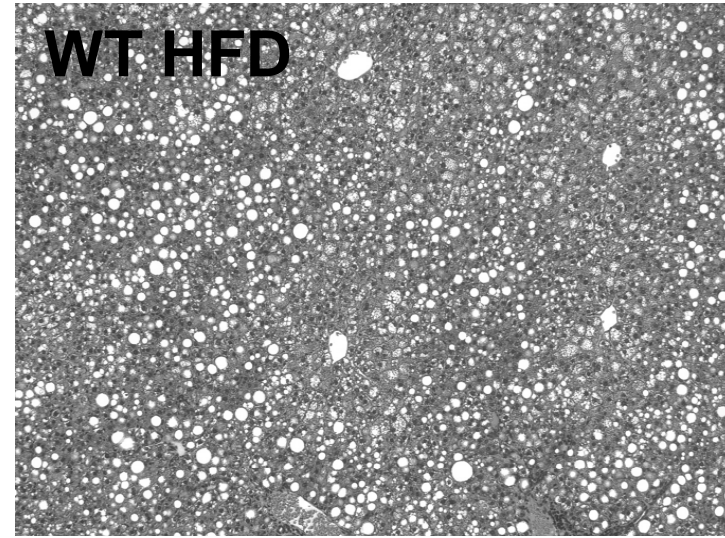
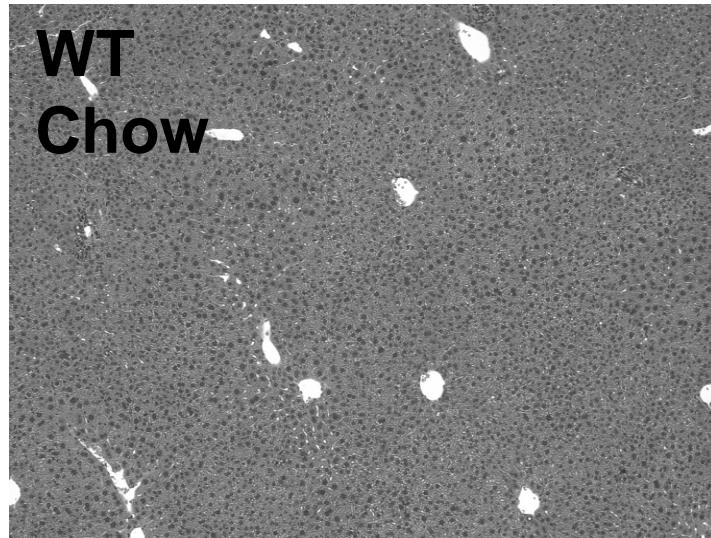


S. Chowdhury

*P<0.05 compared to WT



FAP gko mice 20 weeks DIO: Less severe liver histology (H&E)



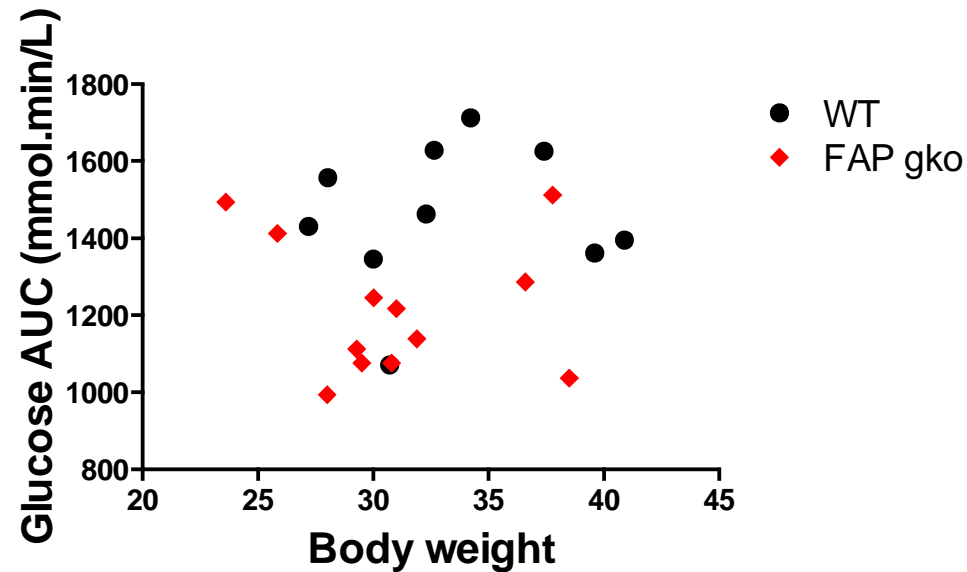
FAPgko
qPCR

FoxO1
ApoC3
PPAR g
TNF

no change
SREBP1c
PPAR α



Improved oGTT is unrelated to body weight



20 weeks DIO.
n = 10-12 per group

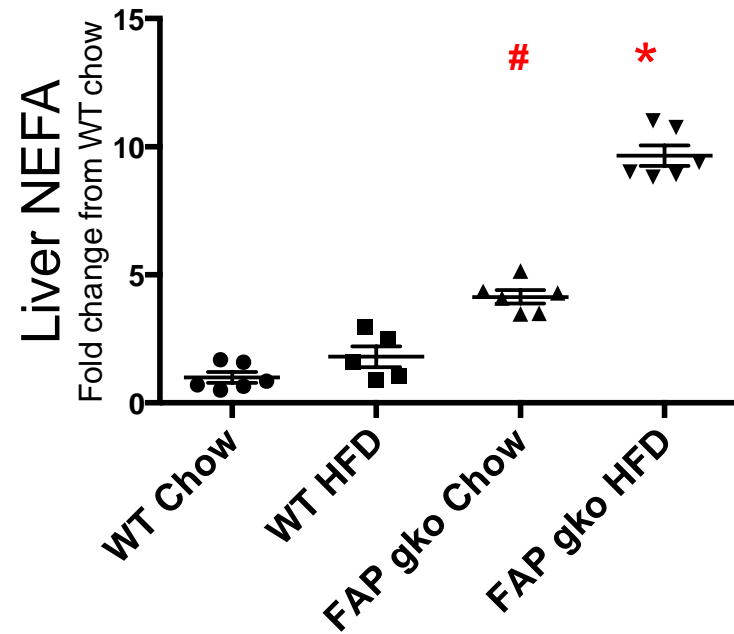
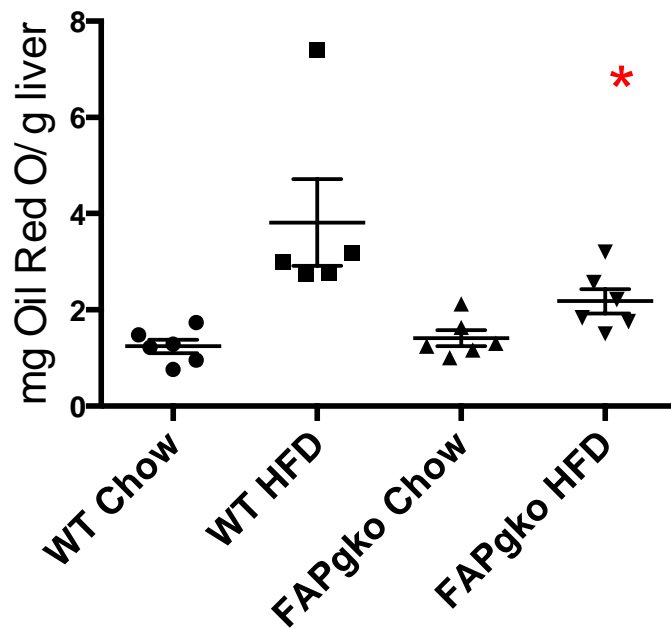
Level of intact GLP1 unchanged in FAPgko



Mechanisms in FAP gko liver:

Less lipid: Non-esterified fatty acids elevated
[consistent with increased fat burning]

FA import (CD36) and lipogenic (GK) genes down



$p < 0.05$ compared to WT Chow

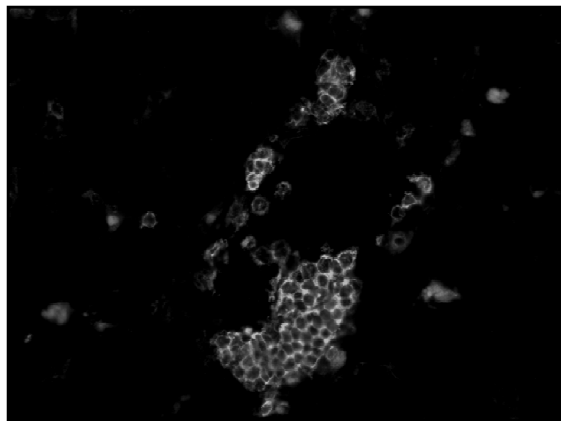
* $p < 0.05$ compared to WT HFD

Lower levels of CD36 and glucokinase

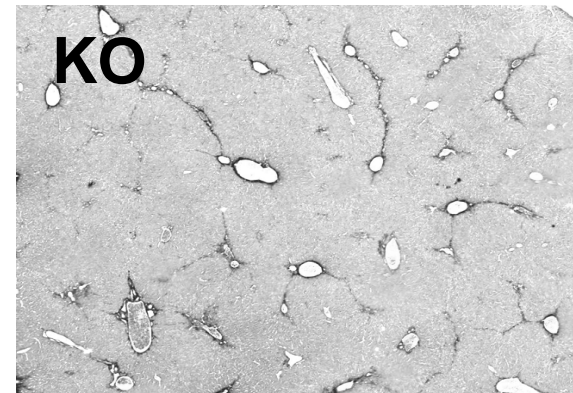
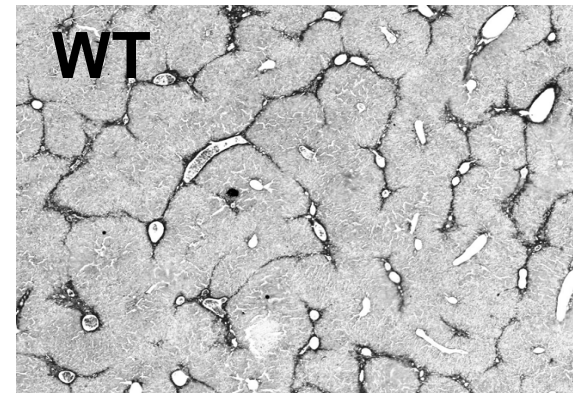


FAP gko Mouse Phenotype

- Liver fibrosis CCl₄ model:
 - Less fibrosis
 - Less inflammation [B cell clusters]



B cell clusters in liver



Sirius red stain of crosslinked collagen



Discussion:

- **DPP4** inhibition lessens steatosis and possibly fibrosis.
- **DPP4** may be a liver damage biomarker; possibly of apoptosis.
- **FAP** is fibrosis associated; highly upregulated in activated mesenchymal and stellate cells in liver.
- **FAP** gko mouse has less fibrosis and less steatosis, and improved glucose tolerance and insulin sensitivity.
- Mechanism may involve increased fat burning, less FA uptake, less lipogenesis.
- How FAP lowers insulin is not known [not GLP1]. [leptin?]
- Need to discover FAP substrates.
- Potential for dual blockade of DPP4 and FAP to improve glycaemic parameters.
- Potential for DPP4, FAP and/or their substrates to become biomarkers.



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AUSTRALIA

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Boehringer Ingelheim for FAP gko mouse
D Marguet for DPP4 gko mouse

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University of Sydney



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END

